

# MIDDLE SCHOOL TENNIS LEAGUE

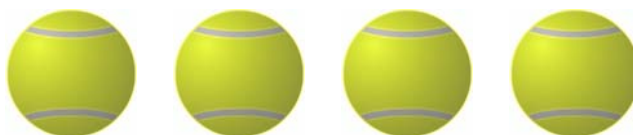
## SPRING SEASON

Players report to Shallotte  
or Smithville Park on  
March 12th.

&

Coaches will then assign players  
to other court locations  
in Shallotte & Southport

**Ages: 11 - 14**



**Participants have one  
match and one  
practice per week**

**March 12 - April 30 (Tuesdays and Thursdays) - 3:30PM to 5:00PM.**

**PHONE: (910)253-2670**

Registrations will be taken at the Brunswick  
County Parks & Recreation in Bolivia at the  
Government Complex / Building M - Monday  
thru Friday from 8:30a.m. - 5:00p.m.

Registration Fee: \$30.00 each

Mail Applications to:

Brunswick County Parks & Recreation

Attn: Brian Moore / Aaron Perkins

P.O. Box 249

Bolivia, North Carolina 28422

[www.brunsko.net](http://www.brunsko.net)

Sponsored by:

Brunswick County Tennis Association and  
Brunswick County &  
Oak Island Parks & Recreation



# Middle School Tennis League

## Registration Form

### **ATHLETIC REGISTRATION FORM**

Brunswick County Parks & Recreation Department

**NAME:** \_\_\_\_\_ **M/F:** \_\_\_\_\_  
(LAST) (FIRST) (MIDDLE)

**BIRTHDATE:** \_\_\_\_\_ **AGE:** \_\_\_\_\_  
(MONTH) (DAY) (YEAR)

**MAILING ADDRESS:** \_\_\_\_\_  
(STREET or P.O. BOX)

(CITY) \_\_\_\_\_ (ZIP) \_\_\_\_\_  
**PHONE:** \_\_\_\_\_ **EMAIL:** \_\_\_\_\_ @ \_\_\_\_\_

**EMERGENCY PHONE/CONTACT:** \_\_\_\_\_

**Location (please check)**

**Smithville Park** \_\_\_\_\_ **Shalotte Park** \_\_\_\_\_

**PLEASE LIST ANY ALLERGIES OR PHYSICAL PROBLEMS THAT THE TENNIS COACHES SHOULD BE AWARE OF:**

T-Shirt Size: Youth Small ☐ Youth Medium ☐ Youth Large ☐ Adult Small ☐

If you need another size please fill in: \_\_\_\_\_

**PARENT / GUARDIAN IS INTERESTED IN SERVING AS A COACHING ASSISTANT? IF YES, PLEASE CHECK**

AS A PARENT OR GUARDIAN, I GIVE MY CONSENT FOR THE ABOVE NAMED TO PARTICIPATE IN THIS ACTIVITY. I THEREFORE RELEASE BRUNSWICK COUNTY TENNIS ASSOCIATION, ITS MEMBERS, VOLUNTEERS AND THE BRUNSWICK COUNTY PARKS AND RECREATION, ITS OFFICERS, EMPLOYEES OR AGENTS, FROM ANY AND ALL LIABILITY AND RESPONSIBILITY FOR ANY ILLNESS, INJURY, ACCIDENTAL DEATH OR DAMAGE TO PERSONAL PROPERTY SUSTAINED IN THE ABOVE ACTIVITY.

**EMAIL & PHONE NUMBER CONSENT:**

AS A PARENT OR GUARDIAN, I GIVE PERMISSION TO SHARE MY EMAIL ADDRESS AND PHONE NUMBER IN A PLAYER ROSTER TO BE SHARED WITH MY CHILD'S COACHES AND TEAMMATES.

YES, I GIVE PERMISSION: \_\_\_\_\_ NO, I DO NOT GIVE PERMISSION: \_\_\_\_\_

**PARENTAL MEDICAL TREATMENT AUTHORIZATION:** In the event of injury to MY/OUR child, I/WE hereby grant authority to a qualified paramedic/ physician to render such medical treatment as said paramedic/physician deems necessary under the circumstances.

**PICTURE CONSENT FOR FILM / WEBSITE / ADVERTISEMENTS:** I/WE give permission to have my child's picture on the BCP&R or B.C.T.A. web site, program advertisements, video for purposes of televising program and any other medium used strictly to promote Brunswick County Parks and Recreation as well as the Brunswick County Tennis Association.

\_\_\_\_\_  
PARENT OR GUARDIAN DATE

MAIL TO: BCP&R / ATTN: BRIAN MOORE / P.O. BOX 249 / BOLIVIA, NC 28422 FAX: 910-253-2684

(Office Use Only Below)

Fee: \$30.00 Cash: \_\_\_\_\_ Check: \_\_\_\_\_ Check #: \_\_\_\_\_ Date: \_\_\_\_\_ Receipt: \_\_\_\_\_